



ADJUNCT FACULTY CLASSROOM INSTRUCTIONAL EVALUATION FORM

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|----------------------|---------------------------|--------------------------------|
| Faculty Name: | Date: | Time: |
| Evaluator: | Location: | |
| Course: | Course Enrollment: | Students in Attendance: |
| Topic: | | |

NUMERICAL RATING SCALE

| 0 | 1 | 2 | 3 |
|---------------------------------|-------------------------------|--------------------|----------------------|
| Does Not Apply/ Not Observed | Does Not Meet Expectations | Meets Expectations | Exceeds Expectations |

PREPARATION/ORGANIZATION

| | |
|---|---------------|
| Learning objectives are clear and adhere to course syllabus. | Rating |
| Supplementary materials and/or media are prepared and utilized to enhance learning. | Rating |
| Lessons have a clear beginning/introduction, the development of main topics/concepts, and a clear ending with a review/summary. | Rating |

DELIVERY

| | |
|---|--------|
| Instructor demonstrates mastery of subject matter and explains it effectively and confidently. | Rating |
| Instructor displays enthusiasm/passion for the subject matter. | Rating |
| Instructor's use of class time was planned and well-paced. | Rating |
| Instructor utilizes a variety of learning activities beyond lecture/discussion including demonstrations, visual media, small group work, case studies, etc. | Rating |

INTERACTION

| | |
|---|--------|
| Instructor effectively uses questions to maintain students' attention and increase discussion/dialogue. | Rating |
| Instructor effectively and respectfully responds to students' questions to enhance discussion/dialogue. | Rating |
| Instructor maintains an atmosphere conducive to learning and engagement. | Rating |

Evaluator's Signature: _____ Date: _____

The signature below indicates this evaluation has been discussed with me but does not constitute consent or agreement. I understand I may prepare a narrative statement to be attached to this document.

Adjunct Faculty Member's Signature: _____ Date: _____